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PATENT  
Attorney Docket No. LEX 007  
FEB 12 2003 16002300

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Gillies *et al.* CONFIRMATION NO.: 3473  
SERIAL NO.: 09/621,268 GROUP NO.: 1642  
FILING DATE: July 21, 2000 EXAMINER: K. Canella, Ph.D.  
TITLE: Fc Fusion Proteins for Enhancing the Immunogenicity of Protein and Peptide Antigens

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 19<sup>th</sup> day of September, 2003.

  
Diane Racicot

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Fee Transmittal (1 page);
3. A check in the amount of \$180.00;
4. Supplemental Information Disclosure Statement (2 pages);
5. Form PTO-1449 (16 pages);
6. References Labeled A8-A58, B4-B93 and C3-C168;
7. and a return receipt postcard.



1642

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TRANSMITTAL  
FORM

Application Serial No.:	09/621,268
Filing Date:	July 21, 2000
First Named Inventor	Gillies
Group Art Unit	1642
Examiner Name	K. Canella, Ph.D.
Attorney Docket No.	LEX-007

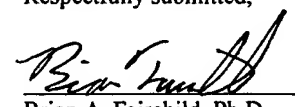
## ENCLOSURES (check all that apply)

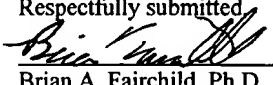
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| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><input type="checkbox"/> Extension of Time Request<br><input checked="" type="checkbox"/> Supplemental Information Disclosure Statement<br><input checked="" type="checkbox"/> PTO-1449<br><input checked="" type="checkbox"/> Copy of IDS Citations (A8-A58; B4-B93; C3-C168)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input type="checkbox"/> Formal Drawing(s)<br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> After Allowance Communication to Group | <input type="checkbox"/> Appeal Communication to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
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## CORRESPONDENCE ADDRESS

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Fax No.: (617) 248-7100

## SIGNATURE BLOCK

Respectfully submitted,  
  
Date: September 19, 2003  
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Fax No.: (617) 248-7100  
Brian A. Fairchild, Ph.D.  
Agent for Applicants  
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PATENT TRANSMITTAL FY 2003		Complete if Known																																																																																					
<div style="position: relative; height: 100px;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-radius: 50%; text-align: center; line-height: 100px; font-size: 2em; font-weight: bold;"> O I P I E SEP 2 9 2003 PATENT &amp; TRADEMARK OFFICE </div> </div>		Application Serial Number	09/621,268																																																																																				
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																							
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted  Date: September 19, 2003 Reg. No.: 48,645 Tel. No.: (617) 248-7697 Fax No.: (617) 248-7100 Brian A. Fairchild, Ph.D. Agent for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																					



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Name of Applicants	Gillies <i>et al.</i>
Intf. or Serial Number	09/621,268
Atty:	BAFairchild/AIYoung
Date:	September 19, 2003

2682103